

<b>CHANGE OF CORRESPONDENCE ADDRESS Application</b>	Application Number Filing Date First Named Inventor Art Unit Examiner Name Attorney Docket Number	10/813,472 March 30, 2004 Yolanda Prieto 2626 Stoffregen, Joel CM02768J
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Address to:  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Please change the Correspondence Address for the above-identified application to:

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**OR**

☐ Firm or Individual Name Barbara R. Doutre, Esq.  
Motorola, Inc.

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I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or agent of record. Registration Number 39,505

☐ Registered practitioner named in the application transmittal letter in an Application without an executed oath or declaration. See 37 CFR 1.33 (a)(1).  
 Registration Number \_\_\_\_\_

Signature /Barbara R. Doutre/  
 Typed or Printed Name Barbara R. Doutre  
 Date November 5, 2007 Telephone 954-723-6449

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.